| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 21 | 1/11/01 |
| FORMALITY REVIEW | M.H. | 625 | 01-24-01 |
| RESPONSE FORMALITY REVIEW | | 676 | 05/15/01 |
| | | | |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | ................................ Rejected | N | ................................ Non-elected |
| = | ................................ Allowed | I | ................................ Interference |
| — | (Through numeral)... Canceled | A | ................................ Appeal |
| ÷ | ................................ Restricted | O | ................................ Objected |

Claim / Final / Original / Date

Claims 1–50 (first column), 51–100 (second column), 101–150 (third column)

Circled: 1, 6, 11, 14, 20, 26, 27, 31

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)